CHAPTER FIVE

PREVENTION SERVICES MATERIAL

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Please see DASA's website for the following:
Collaborative Needs Assessment forms
CSAP Strategies and Activity numbers
Risk and Protective Factors

Children's Transition Initiative (CTI) Description and Guidelines

The Division of Alcohol and Substance Abuse (DASA) has made a commitment to identify and implement intensive prevention services for children with multiple risks for substance abuse.

Washington State survey data clearly show a sharp rise in youth alcohol, tobacco, and marijuana use during children's transition years between grade school and middle school and again between middle school and high school. National research findings demonstrate the benefits derived from prevention services provided over time. This research prompted DASA's support of the "Children's Transition Initiative" (CTI) pilot in the past three biennia. The goal of the Children's Transition Initiative is to prevent children from early first use of alcohol, tobacco, marijuana, and other drugs. DASA will continue to work with interested counties in the development of a prototype of prevention programming that is effective and replicable

The primary outcomes identified for the CTI include:

- Enrolled youth will demonstrate a higher rate of abstinence from alcohol, tobacco, marijuana, and other drugs than non-enrolled youth with similar risk factors, protective factors, and assets.
- An increase in the awareness of risk and protective factors associated with substance abuse by the parents or caregivers of children participating in the CTI.
- 80 percent of youth enrolled in the CTI will be retained in the initiative for minimum of 10 months.

The CTI requires minimum service delivery via program intensity, frequency, and duration with participants:

- Intensity is the number of contact hours a child is receiving or participating in services.
- Frequency is how often contacts are made with the children.
- Duration is the length of time a child is participating in services.

Each participant will receive a minimum 10 months of service. Services will be provided directly to children and their families, but may also include school, peer, and community-based services. CTI participants will complete a pre-assessment to establish individual baseline data. Follow-up assessments will be completed at the end of scheduled programming activities which will relate to the CTI outcomes negotiated between DASA and the County.

Who are the services for?

CTI prevention services will be designed to impact children with multiple risk factors associated with substance abuse. The current age range targeted is 9-13 year olds. Direct services will be provided to the enrolled children and their families. Services may also be provided to the enrolled children's peers and community.

What services are included?

The current iteration of the CTI includes one-to-one mentoring services for enrolled youth, with service delivery expectations established by the latest national mentoring research. The initiative also targets the participants' family environment by requiring parent education for the enrolled children's families. As additional resources are accessed, the project may expand the array of services provided to participants.

What are the Reporting Requirements?

Counties shall report via the DASA Performance Based Prevention System (PBPS). Data will be reported to DASA with the same frequency as required for other prevention services. Individual participant information will be retained by the county and provided to DASA upon request. DASA requests will be for research purposes only and will not disclose individual information, as federal confidentiality requirements also pertain to prevention programs.

How is CTI different from existing county contracted services?

Both DASA and counties recognize the value in providing intensive prevention services over time to children with multiple risks in their lives. CTI provides a process for counties to voluntarily work with DASA to pilot methods of enhancing such a service delivery model. In return, volunteer counties benefit from the enhanced technical assistance available in the learning community meetings. CTI is a voluntary agreement between DASA and the participating county. The contracting process remains the same for county prevention services. The service delivery expectations will be different, however, for resources allocated to the CTI. To clarify this difference, the following guidelines have been established:

DASA agrees to:

- 1. In collaboration with the CTI partners, develop the model incorporating evidence-based programs and practices, and service delivery minimums.
- 2. Provide CTI-specific data collection tools and reporting mechanisms in the PBPS, as needed.
- 3. Collect, analyze, and repot CTI findings to counties.
- 4. Provide CTI technical assistance to counties volunteering for the CTI.
- 5. Convene meetings of participating counties as a learning community.

Counties agree to:

- 1. Identify and enroll a group of children with multiple risk factors to participate in the CTI.
- Provide services to children for a minimum of 10 consecutive months.
- 3. Provide the evidence-based services to children and their families as negotiated

between DASA and the CTI partners.

- 4. Administer DASA-issued participant assessments prior to service delivery, and at the end of services.
- 5. Retain individual information. Provide DASA with the individual participant information upon request.
- 6. Provide information on planned services and report those services to DASA on the Prevention MIS.
- 7. Participate in the DASA CTI learning community meetings.

County-Based Prevention Monitoring

Expectation: Counties shall monitor prevention sub-contractors in order to

ensure quality assurance of products and services.

Requirement: Prevention Sub-Contractor Monitoring Plan

Products – Monitoring may include written prior approval of final products by the sub-contractor

Awareness materials: brochures, posters, public services announcements etc.

- Training materials
- Evaluation tools

Events – Monitoring may include written approval of plan, and written documentation the event happened according to the plan, (i.e.; sign in sheets, evaluation summaries etc.)

- Health Fairs
- Project Graduation
- Awareness Presentations

Services- Monitoring shall include annual on-site reviews of programs that include service interacting with children and/or families multiple times.

- Parenting classes
- School-based curriculum
- > After school centers

APPENDIX-A

MINIMUM DATA SET

Service Type

Alcohol/Tobacco/Drug-Free Social/Recreational Events Attendees

Alcohol/Tobacco/Drug-Free Social/Recreational Events Participants

Community Drop-In Centers

Community Drop-In Center Attendees

Community Drop-In Center Participants

Community Service Attendees

Youth/Adult Leadership Function Attendees

Youth/Adult Leadership Function Participants

Assessing Service and Funding

Assessing Community Needs

Community/Volunteer Service Attendees

Formal Community Teams

Community Team Activities

Training Services Attendees

Training Service Participants

Technical Assistance Service Attendees

Technical Assistance Service Participants

Systematic Planning Services

COSA Group Participants

Classroom Educational Service Participants

Educational Services for Youth Group Participants

Parenting/Family Management Service Participants

Peer/Leader/Helper Program Participants

Small Group Session Participants

Clearinghouse/Information Resource Center

Health Fair Attendees

Original A/V Material Developed

Original Printed Material Developed

Original Curricula Developed

Original Newsletters Developed

Original PSAs Developed

Original Resource Directories Developed

A/V Material Disseminated

Printed Material Disseminated

Curricula Disseminated

Newsletters Disseminated

PSAs Disseminated

Resource Directories Disseminated

Media Campaigns Distributed

Speaking Engagement Attendees

Telephone Information Service Calls Received

Employee Assistance Program Attendees

Employee Assistance Participants

Student Assistant Program Attendees Student Assistance Program Attendees

Student Assistance Program Participants

DUI/DWI/MIP Program Participants

Prevention Assessment and Referral Attendees

Environmental Consultation to Communities

Preventing Underage Sale of Tobacco and Tobacco Products Synar Amendment

Preventing Underage Alcoholic Beverage Sales

Establishing ATOD-Free Policies

Changing Environmental Codes Ordinances Regulations and Legislation

Public Policy Efforts

No Service Type Code Entered